



STATE OF ARIZONA

CANDIDATE
\$500 THRESHOLD EXCEPTION STATEMENT
[A.R.S. § 16-903(A)]

FOR OFFICE USE ONLY

1. _____
Name of Candidate

Address

City ZIP Code Phone Number

Office Election Year

Party Affiliation

2. ID #

3. This is to certify that I have not received contributions of more than five hundred dollars or made more than five hundred dollars in expenditures, and I do not intend to receive or expend more than five hundred dollars for the _____ election.

I further certify that if I receive contributions of more than five hundred dollars or if I make more than

I, _____, certify that this Exception Statement is true and complete.
(Name of Candidate - Printed)

Signature

Date

NOTE: Candidates for state-wide offices and the legislature file this Statement with the Secretary of State Election Services, 1700 West Washington, 7th Floor, Phoenix AZ 85007

Candidates for county offices file this Statement with the county's officer in charge of elections.

Candidates for city or town offices file this Statement with the city or town clerk.

Candidates for special district elections (such as school, water, fire or irrigation districts) file this Statement with the clerk of the board that governs that district.